

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	18		02-22-01
<b>O.I.P.E. CLASSIFIER</b>		8	03/09/01
<b>FORMALITY REVIEW</b>	115	866	63-15-01
<b>RESPONSE FORMALITY REVIEW</b>	Int	571	05/15/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	1	1	12/06/03
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy